

Diocese of Victoria
Office of Youth Ministry
Scholarship Request Form 2010-2011

Student's Name: _____

Parents' Name(s): _____

Address: _____
Street City Zip

Home Phone: _____ Cell Phone: _____

Email: Parent _____ Student _____

Parish: _____ Grade: _____

Youth Ministry Event for which the Scholarship is to be applied: (please circle)
Jr. High Fiesta Youth Spectacular YLT Retreat Camp David D-Week RMH Other

Please write a brief reason why you want to attend this Diocese of Victoria, Office of Youth Ministry sponsored event.

What assistance do you need financially for this event?

Partial Scholarship in the amount of \$_____

(Please note that all who request scholarships are responsible for paying the initial deposit for that specific event. Also, scholarships will be awarded on a first-come-first-served basis until the scholarship fund is depleted.)

Please complete and submit to:

Diocese of Victoria
Office of Youth Ministry
P.O. Box 4070
Victoria, TX 77903

You will be notified by e-mail or phone as soon as possible.

(For Office Use Only)

Date Received: _____ Request Accepted: _____ Amount Granted: _____

Request Denied: _____